

### Application Data Sheet

#### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R:: None  
Sequence submission:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: None  
Title:: **“Compositions and Methods for Genetic Analysis of Polycystic Kidney Disease”**  
Attorney Docket Number:: 1133/2002  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1-13  
Total Drawing Sheets:: 54  
Small Entity:: Yes  
Petition Included:: No  
Secrecy Order in Patent No  
Application?::

#### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity

Given Name:: Jeffrey  
Middle Name:: G.  
Family Name:: Jones  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 377 Plantation Street  
City of Mailing Address:: Worcester  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Jorge  
Middle Name:: A.  
Family Name:: Garces  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 377 Plantation Street  
City of Mailing Address:: Worcester  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Jing

Middle Name::  
Family Name:: Wang  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 377 Plantation Street  
City of Mailing Address:: Worcester  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: A.  
Family Name:: Curran  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 5 Gilman Street  
City of Mailing Address:: Worcester  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Susan  
Middle Name:: K.

Family Name:: Allen  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 377 Plantation Street  
City of Mailing Address:: Worcester  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

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Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Kerry  
Middle Name:: E.  
Family Name:: Flynn  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 377 Plantation Street  
City of Mailing Address:: Worcester  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

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Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Aidan  
Middle Name:: N.

Family Name:: Hennigan  
City of Residence:: Milbury  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 49 ½ Miles Street  
City of Mailing Address:: Milbury  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01527

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Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Norm  
Middle Name::  
Family Name:: Robichaud  
City of Residence:: Worcester  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 377 Plantation Street  
City of Mailing Address:: Leominster  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01605

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Applicant Authority Type:: Inventor  
Primary Citizenship Country:: United States  
Status:: Full Capacity  
Given Name:: Christopher  
Middle Name:: M.

Family Name:: Palatucci  
City of Residence:: Shrewsbury  
State or Providence of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: 21 Keyes House Road  
City of Mailing Address:: Shrewsbury  
State or Province of Mailing Address:: Massachusetts  
Postal or Zip Code of Mailing Address:: 01545

### **Correspondence Information**

Correspondence Customer Number:: 29933

### **Representative Information**

Representative Information Number::	29933
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### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-provisional	60/328,739	October 12, 2001

## **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::

## **Assignee Information**

Assignee Name:: Athena Diagnostics